

**SERVICE DELIVERY REPORT (SDR)**  
**Local Government Limited Gaming Impact Fund**  
**EMERGENCY MEDICAL SERVICES**

Instructions for completing a Service Delivery Report may be found on the Department of Local Affairs website at:  
**[www.dola.state.co.us/LGS/FA/gaming.htm](http://www.dola.state.co.us/LGS/FA/gaming.htm)**

Reporting Entity (County, Municipality or Special District) Name and Address:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

County of \_\_\_\_\_

Contact Person \_\_\_\_\_ Telephone # \_\_\_\_\_

1. Reporting Period: Year \_\_\_\_\_
  - a. Month \_\_\_\_\_ OR
  - b. Calendar Year Quarters: First \_\_\_\_\_ Second \_\_\_\_\_ Third \_\_\_\_\_ Fourth \_\_\_\_\_
2. Service Delivery Indicators:
  - a. Personnel and fringe benefit costs for reporting period \$ \_\_\_\_\_
  - b. Operating costs for reporting period \$ \_\_\_\_\_  
 (Do not include personnel, capital outlay or debt service costs on outstanding debt)
  - c. Personnel and operating costs for reporting period (a. plus b.) \$ \_\_\_\_\_
  - d. Percent of budget utilized for personnel expenses (a. divided by c.) \_\_\_\_\_ %
  - e. Percent of budget utilized for operating expenses (b. divided by c.) \_\_\_\_\_ %
  - f. Response fees or fees for services assessed other than local taxes  
 during the reporting period \$ \_\_\_\_\_  
 (Only include revenue actually received not accounts receivable. Enter zero if not applicable.)
  - g. Net personnel and operating costs (c. minus f.) \$ \_\_\_\_\_
  - h. Total number of calls/responses during reporting period \_\_\_\_\_
  - i. Unit cost to jurisdiction per call/response (c. divided by h.) \$ \_\_\_\_\_
  - j. Number of calls/responses that are gaming related \* \_\_\_\_\_
  - k. Cost of gaming (j. times i.) \$ \_\_\_\_\_
  - l. Personnel Cost of gaming (k. times d.) \$ \_\_\_\_\_  
 (Enter this amount and the sum of other Emergency Medical Services SDRs  
 [Line l.] completed since January 1 on line B. 1. of the Cost Recovery Form)
  - m. Operating cost of gaming (k. times e.) \$ \_\_\_\_\_  
 (Enter this amount and the sum of other Emergency Medical Services SDRs  
 [Line m.] completed since January 1 on line B. 2. of the Cost Recovery Form)

\*Report commuters (tourists, casino employees or employees of casino-support businesses) traveling to or from Cripple Creek, Black Hawk or Central City, which require first response or back-up assistance from your jurisdiction's service. This example is provided to demonstrate the relationships that must exist to justify impact costs. Other examples may exist.